## L23000182886

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Pue	iness Entity Nar	
eua)	iness Entity Nar	ne)
	ument Number)	<del></del>
(500	umencivumber)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



500405826165

94/19/23--01002--012 \*\*30.00

FILED
2023 APR 19 AM 9: 43
SEC. FLATE
FALE MARSSEE, FL

2023 APR 19 AM 9:

ALCHIN TO

## **COVER LETTER**

	on Section f Corporations		
SUBJECT:	Veggs Hom	e Repair Or nited Liability Company	id Cleaning LLC
The enclosed Articl	les of Amendment and fee(s) are sub	omitted for filing.	
Please return all con	rrespondence concerning this matter	to the following:	
	Melissa	Name of Person	
	640 Gleno	Finn/Company  Jale In Dange  Address	Perk F1 32065
	E-mail address:	City/State and Zip Code Lital 47 6 ho (to be used for future annual report	stmail. Com
For further informa	tion concerning this matter, please o	eall:	
Melios	ame of Person	at ( 90 H) 3	33 - 047Z aytime Telephone Number
Enclosed is a check	for the following amount:  Fee	S55.00 Filing Fee & Certified Copy (additional copy is enclosed	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	ddress: tion Section of Corporations	Street Addre Registration Division of	

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

me Repair and Cleaning LLC

<u>(Sime w wie zamine</u>	A Florida Limited Liability Co	ompany)	<u>u.s.</u> ,	
The Articles of Organization for this Limited Lie Florida document number	• •		and	d assigned
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liability com	pany here:		
The new name must be distinguishable and contain the wa	ords "Limited Liability Compa	my," the designation "LLC	C" or the abbreviatio	n "L.L.C."
Enter new principal offices address, if applica	ible:			
(Principal office address MUST BE A STREET	[ ADDRESS)		10 20	<u> </u>
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE E  B. If amending the registered agent and/or reagent and/or the new registered office address	egistered office address (	on our records, <u>ente</u>	OF STATE	A D D S D D D D D D D D D D D D D D D D
agent and/or the new registered office address	, nere.			
Name of New Registered Agent:	Melissa	a Vega		
New Registered Office Address:	640	ilendale	12	
	Orange Pa	Enter Florida street addre	Norida <u>32</u> Zip C	2065
New Registered Agent's Signature, if changing R	egistered Agent:			

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability

company has been notified in writing of this change.

Me Div VegaIf Changing Registered Agent/Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member Address 640 Glendale IN Overge Park FL 32065 Mad Title Name Type of Action □Remove □Change \_\_\_\_\_ □Remove \_\_ Change \_\_\_\_\_ □Remove \_\_\_\_\_ □Change \_\_\_\_\_ Change \_\_\_\_\_ [] Add \_\_\_\_\_ □Remove

\_\_\_\_\_ □Change

	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	<del></del>
	, <del></del>
(If an o Note	ctive date, if other than the date of filing:
the rec	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the filed.
Date	d 04-18-2023.  Methods Ulganistic of member or authorized representative of a member
	McChose Olyc
	Nelissa Vega Typed or printed name of signee
	14/6/135a Vegg

Filing Fee: \$25.00